

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

**10/519325**

**1 Date of Request:** \_\_\_\_\_ **2 Serial/Patent #** \_\_\_\_\_

<b>3 Please refund the following fee(s):</b>		<b>4 PAPER NUMBER</b>	<b>5 DATE FILED</b>	<b>6 AMOUNT</b>
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$

	<b>7 TOTAL AMOUNT OF REFUND</b>	\$
--	---------------------------------	----

<b>8 TO BE REFUNDED BY:</b>	
<input type="checkbox"/>	Treasury Check
<input type="checkbox"/>	Credit Deposit A/C #:
<b>9</b>	<div style="border: 1px solid black; display: inline-block; padding: 2px;"> <div style="display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>--</span> <span></span> </div> </div>

**10 REASON:**

<input type="checkbox"/>	Overpayment
<input type="checkbox"/>	Duplicate Payment
<input type="checkbox"/>	No Fee Due (Explanation):

**11 REFUND REQUESTED BY:**

**TYPED/PRINTED NAME:** \_\_\_\_\_  
**SIGNATURE:** \_\_\_\_\_  
**OFFICE:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_  
**PHONE:** \_\_\_\_\_  
Adjusted Date: 06/01/2005 Pridwell  
 01/05/2005 HKAYPAGH 00000070 041105 105.9325  
 500.00 CR

\*\*\*\*\*  
**THIS SPACE RESERVED FOR FINANCE USE ONLY:**

**APPROVED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

**Office of Finance  
 Refund Branch  
 Crystal Park One, Room 802B**